Jennifer A Jurgens

Dear Senator Marleau,

I am writing to express my support of Senate Bill 879. As a breast cancer survivor who was fortunate to have her breast cancer found and treated early, I am an example of how the mammogram works (and works well) for a woman with non-dense breast tissue. My mother was not as fortunate and did not find her breast cancer before it spread. She was killed by breast cancer when she was 36 years old. I was 12 years old at the time, forever changed and determined to make breast health a priority for myself.

I started having mammograms when I was 30 years old. Because of my history and because I was told by my doctor that I had dense breasts, I pushed for and paid for my own screening MRI. The results of the MRI were clear (no masses) but my doctors recommended that I continue annual mammograms. As I aged, my breast tissue became less dense. This was extremely fortunate for me as my cancer was found early, when I was just 36 years old, and before it had grown and left the breast. Women who find their cancer before it leaves the breast have a 99% survival rate.

My treatment and cancer journey were relatively easy compared to what other women go through and what I witnessed with my mother. I had a bilateral mastectomy with reconstruction and missed a total of three weeks of work. The total cost of my treatment was around \$80,000. Because it was found so early, cancer did not interrupt my career or my ability to care for my family. By comparison, later-stage cancers cost upward of \$300,000 and patients typically miss months of work as their bodies battle, and then try to recover from, the chemotherapy and other treatments.

Beyond the pure economic advantages to early diagnosis, there are multiple psychological benefits as well. Again because my cancer was found early, I was offered a nipple-sparing mastectomy; a surgery that is becoming more viable in younger women with early stage cancer. As a young, single woman I cannot describe the feeling of waking up from a bilateral mastectomy without your breasts. Because I opted for immediate reconstruction and because I could keep my nipples, I was less shocked when I first saw my body in the mirror. The reconstruction process and end results have been truly amazing... and enabled me to confidently date, wear my bathing suit, change in a locker room full of people, and truly move on with my life without a constant reminder of cancer every time I saw myself in the mirror.

Younger women typically have denser breast tissue in general, making a tumor difficult to spot. This is especially alarming as women who develop cancer when they are under the age of 40 typically get more aggressive (and therefore more deadly) forms of breast cancer. What if my breasts had not naturally become less dense over time? There is a good chance that my screening mammogram would not have found the cancer and I would not have had the same, favorable treatment experience.

I am an advocate for early detection. And I believe that every woman has the right to know which tests are best for her so that she can be her own best advocate. By adding the one paragraph noted in SB 879 on breast density to the post-mammogram letter, countless lives could be saved (as well as the dollars spent on a later-stage diagnosis for more invasive surgery, chemotherapy, radiation, ongoing pharmaceuticals and more). I am asking that this bill be approved so that more women are educated about density so they can make the right choices for their bodies, resulting in better treatment results, higher self-esteem and confidence, fewer missed work days and lower breast cancer mortality.

Sincerely,

Jennifer A. Jurgens